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PTO/SB/82 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0035  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	Application Number	09/164,504
	Filing Date	September 30, 1998
	First Named Inventor	Michael S. Kappes
	Group Art Unit	2731
	Examiner Name	
	Attorney Docket Number	210149.406

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

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I am the:

☐ Applicant/Inventor.

X Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Kelly H. Hale
Signature	
Date	Sept. 12/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 4 forms are submitted.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Michael S. Kappes  
Application No. : 09/164,504  
Filed : September 30, 1998  
For : ECHO CANCELING METHOD AND APPARATUS FOR  
DIGITAL DATA COMMUNICATION SYSTEM

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Docket No. : 210149.406  
Date : October 8, 2001

Commissioner for Patents  
Washington, DC 20231

APPOINTMENT OF ASSOCIATE POWER OF ATTORNEY

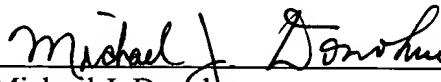
Commissioner for Patents:

I, Michael J. Donohue, attorney of record in the above-identified application, appoint as associate attorneys Daniel N. Yannuzzi, Registration No. 36,727; Kelly H. Hale, Registration No. 36,542; and Keith Kind, Registration No. 42,735, of Conexant Systems, Inc., 4311 Jamboree Road, E07-701, Newport Beach, CA 92660.

It is requested that correspondence continue to be addressed to Michael J. Donohue at:

Seed Intellectual Property Law Group PLLC  
701 Fifth Avenue, Suite 6300  
Seattle, Washington 98104-7092

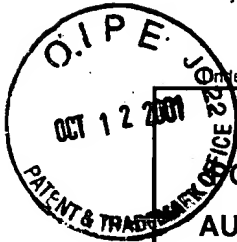
Respectfully submitted,  
Michael S. Kappes  
Seed Intellectual Property Law Group PLLC

  
\_\_\_\_\_  
Michael J. Donohue  
Registration No. 35,859

701 Fifth Avenue, Suite 6300  
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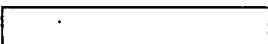
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**POWER OF ATTORNEY OR  
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Application Number	09/164,504
Filing Date	September 30, 1998
First Named Inventor	Michael S. Kappes
Group Art Unit	2731
Examiner Name	
Attorney Docket Number	210149.406

I hereby appoint:

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OR

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Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name Kelly H. Hale

Signature Date *Sept. 12/01*

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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PTO/SB/21 (08-00)  
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## TRANSMITTAL FORM

(To be used for all correspondence  
after initial filing)


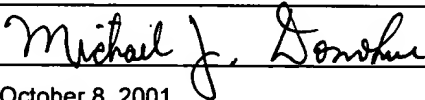
Application Number	09/164,504
Filing Date	September 30, 1998
First Named Inventor	Michael S. Kappes
Group Art Unit	2731
Examiner Name	
Attorney Docket No.	210149.406

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; Form PTO-1449 <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> CD(s), Number of CD(s) _____ <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Additional Enclosure(s) (please identify below): <u>Appointment of Associate Power of Attorney</u> _____ _____ _____ _____
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Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name	Michael J. Donohue	 00500 PATENT TRADEMARK OFFICE
Signature		
Date	October 8, 2001	

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date specified below.

Typed or printed name	Gabrielle Collier	
Signature		Date: October 8, 2001